



131  
V. B. L.

Patent  
S.N. 09/642,911  
6822/62934

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

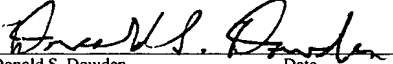
Applicant: Mitsunori Okagaki  
Serial No.: 09/642,911  
Filed: August 21, 2000  
For: COMMUNICATION TERMINAL  
Group Art Unit: 2672  
Examiner: Ryan R. Yang

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JUL 25 2003

Technology Center 2600

I hereby certify that this paper is being deposited this date with the U.S. Postal Service in first class mail addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
Donald S. Dowden  
Reg. No. 20,701  
Date  
July 22, 2003

COOPER & DUNHAM LLP  
1185 Avenue of the Americas  
New York, New York 10036  
(212) 278-0400  
July 22, 2003

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**RESPONSE TO OFFICE ACTION**

This is in response to the Office Action mailed May 6, 2003. Please amend the application as follows:



2672

Patent  
S.N. 09/642,911  
6822/62934

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Mitsunori Okagaki  
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Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

S I R:

Transmitted herewith is an amendment to the above-identified application.

\_\_\_\_\_ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.

\_\_\_\_\_ a verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X  No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER OF EXTRA CLAIMS PRESENTED	FEE			
				SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
Total Claims	2	* 20	*** 0	9	18	\$	\$0
Indepen- dent Claims	2	** 3	*** 0	42	84	\$	\$0
Multiple Dependent Claims Presented _____ Yes For First Time: _____ No				140	280	\$	\$0
				TOTAL ADDITIONAL FEE		\$	\$0

Amendment Transmittal Letter  
Page 2

- \*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- \*\*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- \*\*\*If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

"The HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims as originally filed.

\_\_\_\_ Please charge Deposit Account No. 03-3125 in the amount of \$ \_\_\_\_.  
Three copies of this sheet are enclosed.

\_\_\_\_ Applicant hereby petitions for a \_\_\_\_ month extension. Our check in the amount of \_\_\_\_ is enclosed.

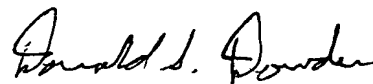
X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Two copies of this sheet are enclosed.

X Any additional fees under 37 C.F.R. §1.16 for the presentation of extra claims.

X Any patent application processing fees under 37 C.F.R. §1.17.

Dated: July 22, 2003

Respectfully submitted,



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